APPENDIX D SERVICE AGREEMENT ENGAGEMENT CONTRACT ORDER FORM

Customer	Name:
Customer	Address:

This Order Form ("OF") shall be governed by the terms of the STATE OF TEXAS DEPARTMENT OF INFORMATION RESOURCES CONTRACT (CONTRACT NUMBER DIR-TSO-3646) dated ______ (the "Contract") between the State of Texas, acting by and through the Department of Information Resources and North American Western Data Systems, Inc. ("Western Data").

A. SERVICES

1. Western Data's, Obligations

a. Scope of Services
Western Data will provide the following Services to Customer:
(Describe Services)

B. RATES AND PAYMENTS

1. Labor Rates

Services shall be provided under this OF in accordance with Section 3 of the Contract. (List Technician Level(s), Rate (Rates are inclusive of the Department of Information Resources Administrative Fee) Hours, and Total Labor Fee.)

2. Travel, Meals, and Lodging Reimbursement

Rates for professional services do not include travel, meals and lodging.

3. Payment Type

The Services specified above are provided on a time and materials ("T&M") basis; that is, Customer shall pay Western Data for all of the time spent performing such Services. Western Data will bill for time and materials no more often than once every thirty days. Western Data acknowledges that Customer is an entity exempt from the imposition and collection of Texas sales taxes under Section 151.309 Texas Tax Code. Any estimate related to the Services performed under this OF is intended only to be an estimate for Customer's budgeting and Western Data resource scheduling purposes. Once fees for Services reach this estimate, North American Western Data Systems, Inc., will cooperate with Customer to provide continuing Services on a T&M basis.

4. Purchase Order

The purchase order will reference CONTRACT NUMBER DIR-TSO-3646.

5. Purchase Order Number

Purchase order number. _____ has been provided to Western Data as of execution date of this Order Form.

6. Invoicing

All fees will be invoiced monthly and will be payable within thirty (30) days of the receipt of invoice, and in accordance with Chapter 2251, Texas Government Code.

Name (Print): _____

Title: _____

7. Customer Billing Accounts Payable Contact/Mail Invoices To:
Name: Address: Telephone: Fax: E-mail:
C. PROJECT INFORMATION
1. North American Western Data Systems, Inc., Project Manager/Contact Information
Name: Address: Telephone: Fax: E-mail:
2. Customer Project Manager/Contact Information
Name: Address: Telephone: Fax: E-mail:
3. North American Western Data Systems, Inc., Contract Manager/Contact Information
Name: Robb Delprado Address: 14722 Regnal Street, Houston, TX 77139 Telephone: 281-885-1511 Fax: 281-987-2743 E-mail: robb@wds-us.com
(Insert Customer Name:)
By:
Name (Print):
Title:
Effective Date:
North American Western Data Systems, Inc.
By: